

APPLICATION FOR/AUTHORIZATION TO CONDUCT BACKGROUND INVESTIGATION

(AE Reg 190-6/USNAVEUR Inst 5300.15N/USAFE Inst 31-205)

Data Required by the Privacy Act of 1974

Authority: 10 USC 3013 and Article 53, Supplementary Agreement to the NATO SOFA.

Principal purpose(s): To obtain information necessary to establish the applicant's reliability (*Zuverlässigkeit*) under the German Weapons Law prerequisite to the issuance of a *Waffenbesitzkarte* (German Weapons Possession Card). The information provided will be forwarded to the United States Federal Bureau of Investigation for the purposes of providing a basis for an electronic background investigation (National Instant Criminal Background Check System), the results of which will be provided to the *Waffenbesitzkarte* issuing agency.

Routine use(s): Social security numbers are required by the U.S. Forces for control purposes, as well as for use in conducting background investigations. Date of birth, place of birth, and civilian address in Germany are required by German law. The form is to be completed by the individual applicant, and the contents certified as applicable by competent military authorities. One copy of this form will be kept by the USAREUR Vehicle Registry and one copy will be provided to the German agency issuing the *Waffenbesitzkarte*. Other routine uses are listed at 58 Federal Register 10002.

Mandatory or voluntary disclosure and effect on individuals not providing information: The information is mandatory under German law and the USAREUR registration program, and is administered according to the German Weapons Law, German implementing ordinances, and AE Regulation 190-6/USNAVEUR Instruction 5300.15N/USAFE Instruction 31-205. An individual can refuse to complete this form, but by doing so will give up the right to obtain, possess, and use a privately owned firearm in Germany.

PART I - PERSONAL INFORMATION (to be completed by applicant)

Name (Last, First, MI)/Name (Familien-, Vorname(n))		Social security number (SSN)/Kenn-Nummer	Grade/Dienststrang	Sex/Geschlecht <input type="checkbox"/> Male <input type="checkbox"/> Female Männlich Weiblich	
Date of birth/Geburtsdatum	Place of birth/Geburtsort	Height/Körpergröße	Weight/Gewicht	Race/Rasse	
Marital status/Familienstand	Nationality/Staatsangehörigkeit	Job/Beruf			
		<input type="checkbox"/> Military <input type="checkbox"/> Civilian <input type="checkbox"/> Family member aktiver Militärdienst ziviles Gefolge Familienangehöriger			
Military address, unit no. and box no./Dienstanschrift		Location/Ort	APO/Feldpostamt	Mil tel no./Diensttelefonnr.	
Spouse's name (Last, First, MI)/Name der Ehefrau/des Ehemannes		Date of stationing in Germany on current tour/ stationiert in Deutschland seit			
Civilian address (local residence)/Wohnhaft Street address/Straße und Hausnummer		City and zip code/Ort und Postleitzahl		Civ tel no./Ziviltelefonnr.	
Sponsor's military address, unit no. and box no./Dienstanschrift des Familienvorstands				APO/Feldpostamt	

Applicant's Statement

1. Pursuant to the German Weapons Law, applicable German implementing ordinances, and AE Regulation 190-6/USNAVEUR Instruction 5300.15N/USAFE Instruction 31-205, I intend to apply for the issuance of a *Waffenbesitzkarte* (German Weapons Possession Card). I understand that in order to qualify for its issuance, I must establish my reliability within the meaning of the German Weapons Law. I herewith apply for and authorize the conduct of a background name check using the National Instant Criminal Background Check System (NICS), Federal Bureau of Investigation (FBI), and authorize and agree to the release of the results to authorized representatives of the German Government and U.S. Army authorities and representatives as authorized under Army regulations and applicable U.S. laws. I understand and agree that in the event NICS responds with a "deny" report that I may initiate an appeal of the denial under NICS operating procedures. The area provost marshal with responsibility will assist in initiating the criminal justice purpose request for NICS and other FBI data.

2. I am a member of the U.S. Forces, or a member of the civilian component, or a dependent of such member within the meaning of Art. I, NATO SOFA. I understand that authorization to possess and use a privately owned firearm (POF) in Germany is subject to applicable provisions of German laws and regulations, and that I am subject to these provisions. I further understand that violation of such German laws or regulations, or applicable U.S. Forces regulations, may result in revocation of my right to retain possession and ownership of a POF in Germany.

Date of application/Datum	Signature of applicant/Unterschrift des Antragstellers
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PART II - APPROVING AUTHORITY

Name and rank of approving authority	Military telephone number
Organization and APO	Signature

PART III - RELIABILITY/ZUVERLÄSSIGKEIT

Where was a police background investigation requested? Wo wurde ein polizeiliches Führungszeugnis beantragt?		
Date investigation completed Untersuchung abgeschlossen am	Result of investigation Ergebnis der Untersuchung <input type="checkbox"/> Favorable Nicht fündig (ohne Bedenken) <input type="checkbox"/> Unfavorable Unvorteilhaft	
Signature of approving provost marshal Unterschrift des Leiters der Stabsabteilung Militärpolizei		